Santa Clara County Public Health Department

Data Highlights of Race/Ethnicity Group Health Status

February 2002



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Web http://www.sccphd.org/statistics2/

Data Sources: Birth Records, Death Records, Tuberculosis Database, Patient Discharge Database, Confidential Morbidity Reports Records, California Department of Finance Population Estimates, Medi-Cal County Databook.

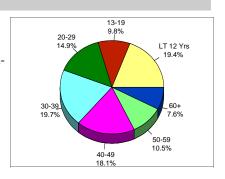
Fact Sheet: Health Status of African Americans in Santa Clara County

Demographics

African Americans represent 3.6% of the population of Santa Clara County. Males and females represent 52% and 42%, respectively, among this population

Maternal & Infant Health

Births. In 2000, 2.2% of resident births in Santa Clara County were among African Americans, a reduction of 39% from 1993, when 3.6% of residents births were among African Americans.



Teen Births. Teen birth rates reduced by 60%, from 54.9 births per 1000 females aged 15-19 years in 1993 to 25.4 births per 1000 in 2000.

Prenatal Care. In 1999, 17.9% of African American women reported that they received late or no prenatal care during their pregnancy, placing them second among all ethnic groups for late or no prenatal care.

High Risk Births. In 2000, African Americans had one of the highest proportions of pre-term births (10.4%) and low-birth weight births (7.1%) in the county.

Infant Mortality. African American infants have the highest infant mortality rates in the county. The average rate between 1996 and 2000 was 12.2 deaths per 1000 live births (average is reported here because of small numbers and increased variability).

Tuberculosis/ Sexually Transmitted Diseases (STD)/ AIDS

- ♦ In 2001, African Americans had the second highest rates of TB with 11 cases per 100,000 population after Asian and other Pacific Islanders. This rate was the first increase after seeing a steady decline since 1996.
- ♦ In 2000, of the reported STD cases of known ethnicity (36%), African Americans represented 9% of cases of Chlamydia and 21.3% of Gonorrhea cases
- ♦ Although incidence rates of AIDS significantly reduced from 76.8 cases per 100,000 population in 1993 to 17.4 cases per 100,000 in 2001, African Americans continue to have one of the highest incidence of AIDS in the county. The proportion of females are also higher among this group compared to other ethnic groups in the county.

Mortality

- ♦ African Americans have the highest age adjusted mortality rates in Santa Clara County. This is true across all age groups except those over 85 years of age. The overall death rate among this group reduced from 983 deaths/100,000 population in 1993 to 829 deaths/100,000 population in 1998., a reduction of 15.7%.
- ♦ In 1999, death rates due to heart disease (261 deaths/100,000) and cancer (223 deaths/100,000) were highest among this group.

Hospitalizations

- Between 1993 and 1999, hospitalization rates among African Americans increased for conditions related to COPD. During the same time frame hospitalization discharge rates due to most other conditions either remained stable or reduced.
- In 1999, the hospital discharge rate per 100,000 was highest among African Americans, relative to all other ethnic groups, for ambulatory sensitive conditions such as asthma (two fold higher), diabetes, and hypertension.

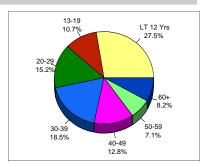
Fact Sheet: Health Status of Hispanics in Santa Clara County

Demographics

Hispanics represent about 21.4% of the population of Santa Clara County. Males represent 52% and females represent 48% of the Hispanic population.

Maternal & Infant Health

Births. In 2000, 33.9% of resident births in Santa Clara County were among Hispanics, a slight decrease of 0.6% from 1993, when 34.1 of residents births were among Hispanics.



Teen Births. Teen birth rates reduced by 25%, from 102.9 births per 1000 females aged 15-19 years in 1993 to 82.2 births per 1000 in 2000. Teen birth rates were the highest among this group in the county.

Prenatal Care. In 1999, 24.2% of Hispanic women reported that they received late or no prenatal care during their pregnancy, the highest proportion of women among all ethnic groups.

High Risk Births. In 2000, the proportion of pre-term births was 8.6% and low-birth weight births was 5.4% among Hispanics, below the county average of 9.1% and 6.1% respectively.

Infant Mortality. Hispanic infants had an infant mortality rate of 6.2 deaths per 1000 live births in 2000.

Tuberculosis/ Sexually Transmitted Diseases (STD)/ AIDS

- ♦ In 2001, Hispanics had a rate of 8.2 cases per 100,000 population, a reduction of 40% since 1993; in 1993 the rate was 13.8 cases per 100,000. Of all the reported cases of TB who were foreign born (N=201), 13% were from Mexico.
- ♦ In 2000, of the reported STD cases with known ethnicity (36%), Hispanics represented 58.3% of cases of Chlamydia and 33% of cases of Gonorrhea.
- Although incidence rates of AIDS significantly reduced from 27 cases per 100,000 population in 1993 to 8 cases per 100,000 in 2001, Hispanics contributed to an incline in the proportion of cases they represent in the recent years.

Mortality

Overall age adjusted death rates for the leading causes of death are the lowest among this group compared to others in the county. However, mortality rates among adolescents (15-24) were the highest in this population (56.6 deaths/100,000) in 1998. However, the numbers are small to make any further valid interpretations.

Hospitalization

- Between 1993 and 1999, hospitalization rates among Hispanics increased for conditions related to hypertension. During the same time frame discharge rates due to most other ambulatory care sensitive conditions reduced or remained stable.
- ♦ In 1999, the hospital discharge rate per 100,000 was highest among Hispanics, relative to all other ethnic groups, for ambulatory care sensitive conditions such as kidney/urinary tract infections, gastroenteritis, and asthma (second highest after African Americans).

Medi-Cal

- ◆ Latinos comprised of the majority (47.6%) of Medi-Cal recipients in the county
- ♦ A recent report on Medi-Cal funded induced abortions suggest that Hispanics account for almost 50% of all abortions paid by Medi-Cal. This may be a reflection of the large number of Hispanic women eligible for emergency services as undocumented aliens.

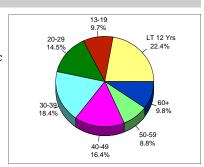
Fact Sheet: Health Status of Asian/Pacific Islanders in Santa Clara County

Demographics

Asian/Pacific Islanders represent 24.3% of the population in Santa Clara County. Males represent 50.3% and females about 49.7% of the Asian/Pacific Islander population.

Maternal and Infant Health

Births. In 2000, 32.5% of resident births in Santa Clara County were among Asian/Pacific Islanders, an increase of 45% from 1993, when 22.4% of residents births were among Asian/Pacific Islanders.



Teen Births. Teen birth rates are the second lowest in this population. The rates declined form 19 births per 1000 females in 1993 to 12.2 births per 1000 females in 2000.

Prenatal Care. In 2000, 13.5% of Asian/PI women reported that they received late or no prenatal care during their pregnancy, placing them third among all ethnic groups for late or no prenatal care.

High Risk Births. In 2000, 8.7 % of all births among Asian/PI were pre-term and 6.6% had a low-birth weight.

Infant Mortality. Asian/Pacific Islander infants had an infant mortality rate of 4.1 deaths per 1000 live births in 2000.

Tuberculosis/ Sexually Transmitted Diseases (STD)/ AIDS

- ◆ In 2001, Asian/PI had the highest rates of TB (36.5 cases per 100,000) in the county. The rate declined since 1996 (63 cases/100,000). A majority of foreign born cases were Asian/PI, specifically from Vietnam, Philippines, India, and China.
- ♦ Tuberculosis rates increased with increasing age. Those over 65 years of age had the highest rate of 113 cases/100,00 in 2001. 84% of all cases in Region 2 in 2001 were among Asian/PI.
- In 2000, of the reported STD cases with known ethnicity (36%), Asian/Pacific Islanders represented 15.2% of cases of Chlamydia and 13.8% of cases of Gonorrhea.
- ♦ Although incidence rates of AIDS are the lowest among this group in the county, the proportion of A/PI cases in the recent years grew from 4.6% in 1993 to 11.8% in 2001.

Mortality

- ♦ In comparison to other groups where deaths due to heart disease and cancer are number one and two respectively, both these causes were tied for the top leading cause of death with a rate of about 130 deaths per 100,000 population in 1999.
- ♦ Pneumonia and Influenza related death rates almost doubled between 1996 and 1999 from 26.6 deaths per 100,000 to 52.2 deaths per 100,000.

Hospitalizations

- ♦ Between 1993 and 1999, hospitalizations among A/PI's increased for conditions related to COPD, dehydration, diabetes, hypertension, and pneumonia and influenza. During the same time frame, discharge rates due to angina, asthma, gastroentiritis, PID, and hypoglycemia reduced in this population.
- ♦ In 1999, the hospital discharge rate per 100,000 was highest among A/PIs, relative to all other ethnic groups, for pulmonary tuberculosis.

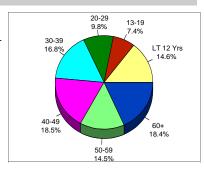
Fact Sheet: Health Status of Whites in Santa Clara County

Demographics

Whites represent 50.8% of the population of Santa Clara County. Males represent 50.3% and females represent 49.7% of the population among Whites.

Maternal and Infant Health

Births. In 2000, 28.6% of resident births in Santa Clara County were among Whites, a reduction of 26% from 1993, when 38.7% of residents births were among Whites.



Teen Births. Teen birth rates are the lowest in this population. The rates declined form 16.82 births per 1000 females in 1993 to 9.32 births per 1000 females in 2000.

Prenatal Care. In 1999, 6.5% of White women reported that they received late or no prenatal care during their pregnancy.

High Risk Births. In 2000, Whites had the second highest proportion of pre-term births (9.6%) and the lowest proportion of low-birth weight births (6%) in the county.

Infant Mortality. Whites had an infant mortality rate of 4.4 deaths per 1000 females in 2000, lower than the county rate of 4.9.

Tuberculosis/ Sexually Transmitted Diseases (STD)/ AIDS

- ◆ TB among whites has achieved the 2010 goal of 1 case per 100,000 population. There was a steady decline in rates between 1993 and 2001: from 3.6 cases per 100,000 to 0.7 cases per 100,000.
- ♦ In 2000, of the reported cases of STDs with known ethnicity (36%), Whites represented about 15% of cases of Chlamydia and 30% of cases of Gonorrhea.
- ♦ Although incidence rates of AIDS significantly reduced from 27.4 cases per 100,000 population in 1993 to 4.3 cases per 100,000 in 2001, Whites continue to represent the majority of cases in the county. Males, individuals between 30 and 39 years, and men who have sex with men comprise of the majority of cases in this ethnic group.

Mortality

- ♦ Whites had the second highest age adjusted mortality rates in the county. This population had the highest overall death rates in seniors over the age of 85 years in Santa Clara County.
- ♦ In 1999, death rates due to COPD (44.8 deaths/100,000) and diabetes (48 deaths/100,000) were higher in Whites than in any other ethnic groups

Hospitalizations

- Between 1993 and 1999, hospitalization among whites increased for conditions related to COPD, diabetes, hypertension, dehydration, and pneumonia and influenza. During the same time frame, discharge rates due to angina, asthma, gastroenteritis, hypoglycemia, and PID reduced.
- ♦ In 1999, the hospital discharge rate per 100,000 was highest among Whites, relative to all other ethnic groups, for ambulatory sensitive conditions such as convulsion, COPD, dehydration, kidney/urinary tract infections, and pneumonia and influenza (almost two-fold).